

## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/752,487	12/29/2000	Michael Verstegen	2000-0615

CONFIRMATION NO. 4140

## FORMALITIES LETTER



\*OC000000005840626\*

Samuel H. Dworetsky  
AT&T CORP.  
P.O. Box 4110  
Middletown, NJ 07748-4110

Date Mailed: 03/08/2001

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)


*Filing Date Granted*

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 130.**

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*A copy of this notice **MUST** be returned with the reply.*

  
Customer Service Center  
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

03/23/2001 GDEBELA1 00000073 012745 09752487

01 FC:105 130.00 CH



IN THE UNITED STATES  
PATENT AND TRADEMARK OFFICE

Applicant(s): Ann C. Guilford et al.

Attorney Docket No.: 2000-0615

Application No.: 09/752487

Filing Date: 12/29/2000

Examiner Name:

Group Art Unit: 2151

Title: Intelligent Network Selection Based On Quality Of Service And Applications Over Different Wireless Networks

COMMISSIONER FOR PATENTS  
WASHINGTON, D.C. 20231  
Box: Missing Parts

RESPONSE TO NOTICE TO FILE MISSING PARTS OF APPLICATION  
Filing Date Granted

Enclosed is the Declaration and Power of Attorney relating to the above-identified application.

Please charge **AT&T Corp. Deposit Account No. 01-2745** in the amount of \$130.00 to cover the filing fee surcharge. A duplicate copy of this letter is enclosed. In the event of any non-payment or improper payment of a required fee, the Assistant Commissioner is authorized to charge or to credit **AT&T Corp. Deposit Account No. 01-2745** as required to correct the error.

A copy of PTO-1533, Notice to File Missing Parts of Application, is also enclosed.

Date:

3/29/01

By:

Thomas M. Isaacson

Thomas M. Isaacson

Attorney for Applicant(s)

Reg. No.: 44166

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Complete Known

Application Number	09/752487
Filing Date	12/29/2000
First Named Inventor	Ann C. Guilford et al.
Examiner Name	
Group/Art Unit	2151
Attorney Docket No.	2000-0615

# **OFFICE TRANSMITTAL**

Patent fees are subject to annual revision.

MAR 22 2001

TOTAL AMOUNT OF PAYMENT \$170

## METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 01-2745  
 Deposit Account Name AT&T CORP.

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance

## FEE CALCULATION

## 1. FILING FEE

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
101	710	Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee	
106	320	Design Filing Fee	
108	710	Reissue Filing Fee	
114	150	Provisional Filing Fee	

SUBTOTAL (1) 0

## 2. CLAIMS

☐ Filing Under 37CFR 1.53 (b)  
☐ CPA Under 37CFR 1.53 (d)  
☐ Amendment

Extra Claims Fee from below Fee Paid

Total - 20= 0 x 18 = 0

Ind. - 3= 0 x 80 = 0

Multiple Dependent Claims = 0

Large Fee Code	Entity Fee(\$)	Fee Description
103	18	Claims in excess of 20
102	80	Independent Claims in excess of 3
104	270	Multiple Dependent Claims
109	80	Reissue independent claims over original patent
110	18	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) 0

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	130
127	50	Surcharge - late provisional filing fee or cover sheet	
139	130	Non-English specification	
147	2520	For filing a request for reexamination	
112*	920	Requesting publication of SIR prior to Examiner action	
113*	1840	Requesting publication of SIR after Examiner action	
115	110	Extension for reply within first month	
116	390	Extension for reply within second month	
117	890	Extension for reply within third month	
118	1390	Extension for reply within fourth month	
128	1890	Extension for reply within fifth month	
119	310	Notice of Appeal	
120	310	Filing a brief in support of an appeal	
121	270	Request for oral hearing	
138	1510	Petition to institute a public use proceeding	
140	110	Petition to revive - unavoidable	
141	1240	Petition to revive - unintentional	
142	1240	Utility issue fee (or reissue)	
143	440	Design issue fee	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	240	Submission of Information Disclosure Statement	
581	40	Recording each patent assignment per property (times number of properties)	40
146	710	Filing a submission after final rejection(37 CFR 1.129(a))	
149	710	For each additional invention to be examined (37 CFR 1.129(b))	

Other fee (specify)

Other fee (specify)

\* Reduced by Basic Filing Fee Paid

SUBTOTAL(3) 170

## SUBMITTED BY

Typed or Printed Name Thomas M. Isaacson

Complete (if applicable)

Reg. Number 44166

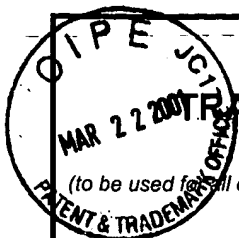
Signature

Date

3/24/01

Deposit Account User ID

SECTOR 1



<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	09/752487
		Filing Date	12/29/2000
		First Named Inventor	Ann C. Guilford et al.
		Group Art Unit	2151
		Examiner Name	
Total Number of Pages in this Submission	18	Attorney Docket Number	2000-0615

**Enclosures (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input type="checkbox"/> Petition for Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input checked="" type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Drawing(s) & Letter to Official Draftsman <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communications to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Additional enclosure(s) (please identify below) <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">         Declaration For Utility Or Design Patent Application       </div>
Remarks		

**CORRESPONDENCE ADDRESS**

<input type="checkbox"/> Customer Number or Bar Code Label		(Insert Customer No. or Attach bar code label here)		or <input checked="" type="checkbox"/> Correspondence address below	
NAME	Samuel H. Dworetzky				
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COUNTRY	United States of America			FAX	732-368-6932

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

NAME	Thomas M. Isaacson		Reg. #	44166
TELEPHONE	410-257-5485			
SIGNATURE			DATE	3/20/01

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 3/20/01			
Type or Printed Name	Nancy C. Marcovici		
Signature		Date	3/20/01

SEND TO: Assistant Commissioner for Patents, Washington, D.C. 20231